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SEP 22 2006

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KEITH ALLEN SAUERLAND  
236 Cross Creek Ln.  
Lindenhurst, IL 60046

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|                           |                    |
|---------------------------|--------------------|
| KEITH A. SAUERLAND        | (Depositor's name) |
| <i>Keith A. Sauerland</i> | (Signature)        |
| 9-19-06                   | (Date)             |

09/25/2006 WABDEL3 00000056 10644111

01 FC:2501  
02 FC:1504

700.00 OP

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|-----------------|-------------|----------------------|---------------------|------------------|
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|

10/644111 08/20/2003 Keith A. SAUERLAND 03093 6528

TITLE OF INVENTION:

CORDLESS STETHOSCOPE FOR HAZARDOUS MATERIAL ENVIRONMENTS

|             |              |               |                     |                      |                  |          |
|-------------|--------------|---------------|---------------------|----------------------|------------------|----------|
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|-------------|--------------|---------------|---------------------|----------------------|------------------|----------|

Non provisional yes \$700 \$300 \$0 \$1000

|          |          |                |
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| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|----------|----------|----------------|

KAHELIN, MICHAEL WILLIAM 3762

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. CHRISTOPHER J. SCOTT

2. \_\_\_\_\_

3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies \_\_\_\_\_

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☒ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number \_\_\_\_\_ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature *Keith A. Sauerland*

Date 9-19-06

Typed or printed name KEITH A. SAUERLAND

Registration No. \_\_\_\_\_

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